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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	905P188 10 645 359	
	Filing Date	8/21/03	
	First Named Inventor	Radosavljevic	
	Group Art Unit	3727	
	Examiner Name	TBD	
Total Number of Pages in This Submission	3	Attorney Docket Number	905P188

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard; WO 2004/070906; WO 2004/066327
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account No. 50-1546.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm and Individual name	Bond, Schoeneck & King Daniel P. Malley Reg. No. 43,443	
Signature		
Date	November 18, 2004	

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: November 18, 2004		
Typed or printed name	Christa Johnson	
Signature		Date November 18, 2004

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PATENT CASE NAME/No. 905P188

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: Radosavljevic

Serial No: 10/645,359

Filing Date: 8/21/03

Title: Shuttered GFCI Receptacle

Group Art Unit: 3727

Examiner: TBD

INFORMATION DISCLOSURE
STATEMENT

Commissioner for Patents
P.O Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

Sir:

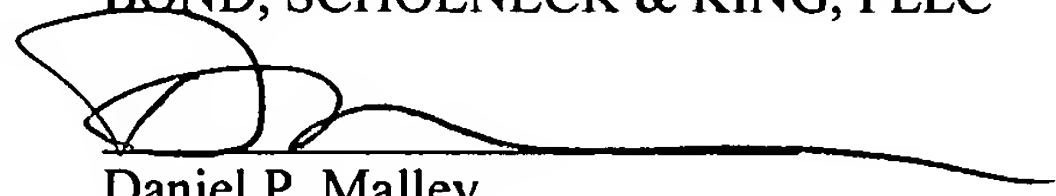
Enclosed, please find an Information Disclosure Statement for the subject application.

Please direct any questions or comments to Daniel P. Malley at (607) 330-4010.

Respectfully submitted,

BOND, SCHOENECK & KING, PLLC

Date: 11-18-04


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**Complete if Known**

(Use as many sheets as necessary)

Sheet	1	of	1
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Application Number	10/645,359
Filing Date	8/21/03
First Named Inventor	Radosavlje
Art Unit	3727
Examiner Name	TBD
Attorney Docket Number	905P188

[illegible]

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T ²
		Country Code ³ ~Number ⁴ ~Kind Code ⁵ (if known)				
	C	WO 2004/066327	08-05-2004	Leviton Manufac		
	D	WO 2004/070906	08-19-2004	Leviton Manufac		

Date
Considered

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